AMENDMENT TRANSMITTAL LETTER (Large Entity) Applicant(s): Jane Ellen Visvader, et al.					Docket No. 17496	
Application No.	Filing Date	Examiner	Custo	ner No.	Group Art Uni	Confirmation No.
10/799,797	March 12, 2004	Lei Yao	23	389	1642	8972
Invention: A METHOD OF DIAGNOSIS AND TREATMENT AND AGENTS USEFUL FOR SAME						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING	HIGHEST #	NUMBER EXTI	RA	RATE	ADDITIONAL
	AFTER AMENDMENT	PREV. PAID FOR	CLAIMS PRESE	NT		FEE
TOTAL CLAIMS	62 -	61 =	1	х		\$50.00
INDEP. CLAIMS	15 -	14 =	1	х	\$210.00	\$210.00
Multiple Dependent Claims (check if applicable) \$0.00						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT \$260.00						
 No additional fee is required for amendment. ✓ Please charge Deposit Account No. 19-1013/SSMP in the amount of \$260.00 A check in the amount of to cover the filing fee is enclosed. ✓ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP ✓ Any additional filing fees required under 37 C.F.R. 1.16. ✓ Any patent application processing fees under 37 CFR 1.17. ✓ Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. 						
Signature Dated: July 15, 2008 Xiaochun Zhu						
Registration No. 56,311 Scully, Scott, Murphy & Presser, P.C. 400 Garden City Plaza-STE 300 Garden City, New York 11530 (516) 742-4343			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on			
	Sig	Signature of Person Mailing Correspondence				
cc: XZ:ab						

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